

## **Birch Grove Primary School Health Room**

247 Rhodes Road, Tolland, CT 06084

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### **KINDERGARTEN**

#### **Health Requirements for Tolland Public Schools**

The following health information is required prior to entry into Tolland Public Schools. If you cannot have the health requirements completed prior to entry (possibly due to insurance reasons), please contact the school nurse.

**Physical** – A physical exam is required within 1 year prior to entering Tolland Public Schools. Please complete the parent portion on the Health Assessment Record form and then have the physician complete the physical and immunization information. The physical must include: height, weight, blood pressure, hemoglobin/hematocrit, immunizations, and date of the physical.

**Immunizations** – Connecticut State Law requires immunizations for all new entrants listed with **Month/Date/Year** information. Please note that the \*Minimum Requirements prior to school enrollment listed on the blue State of Connecticut Health Assessment Record are not the most current. Listed below are the new requirements for school entry and will become effective August 1, 2011:

#### **\*Requirements for the 2011-2012 School Year\***

<b>DTaP</b>	<b>At least 4 doses.</b> The last dose must be given on or after 4 <sup>th</sup> birthday
<b>Polio</b>	<b>At least 3 doses.</b> The last dose must be given on or after 4 <sup>th</sup> birthday
<b>MMR</b>	<b>2 doses</b> given at least 28 days apart (first dose on or after 1st birthday)
<b>Hib</b>	Children less than 5 yrs of age need 1 dose at 12 months or older Children 5 and older do not need proof of Hib vaccination
<b>HepB</b>	<b>3 doses</b> HBV
<b>Varicella</b>	<b>2 doses</b> given at least 3 months apart (first dose on or after 1 <sup>st</sup> birthday) or verification of disease

**PPD** - Check with your Physician. Students entering Tolland Public Schools who meet certain criteria will need a PPD (Mantoux) test prior to entrance to school.

**Emergency Procedure Card** – Please complete the front and back sides of this card.

**Contact the School Nurse** – if your child has any special medical needs or if you have questions.